Effective October 1, 2001													
CLAIMS AS FILED - PART I						ın 2)		SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			グィ					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			u minus 20=		* 4			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		* cs			X42=	1.4	OR	X84=		
MUI	LTIPLE DEPEND	ESENT	SENT				+140=		OR	+280=			
* If th difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									ENTITY	OR	OTHER SMALL E		
_		(Column 1) CLAIMS			mn 2)	(Column 3)	4	CIII/CC	ADDI-			ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 24	Minus	** 2	4	=		X\$ 9=		OR	X\$18=		
MEN	Independent	. 5	Minus	***	紅 3	- 2		X42=	-14	OR	X84=		
4	FIRST PRESEN	NTATION OF MU	JLTIPLE DEI	PENDEN	IT CLAIM		J	+140=.		OR	+280=		
	•							TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
ADDIT. FEE													
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	,	HIG NUI PREV	HEST MBER YIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 16	Minus	** (24	= /		X\$ 9=		OR	X\$18=		
MEN	independent	. 0	Minus	***	5	=/-		X42=		OR	X84=		
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDE	T CLAIM	/	-	+140≤	1	OR	+280=		
			٠		/			ADDIT. FEE		OF	TOTAL ADDIT, FEE		
	-		/.										
AMENDMENT C		(Column 1) CLAIMS REMAINING, AFTER AMENDMENT		HIC NU PRE	umn 2) GHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA	г	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	T tal	•	Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>	
MEN	Independent	•	Minus	***			4	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
	If the entry in colu	ımn 1 is less than	the entry in co	dumn 2, w	rite "0" in c	olumn 3. an 20 enter 1	20.	TOTA		OR	TOTA		
** If the entry in countril 1 is less than the entry in the entry in countril 1 is less than 10, enter "20." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
1		·						Y					

Application or Docket Number